TENNESSEE REGULATORY AUTHORITY DO NOT CALL PROGRAM 460 JAMES ROBERTSON PARKWAY NASHVILLE, TN 37243-0505 615-741-3939

Toll Free 1-800-342-8359

Dear Sir/Madam,

Enclosed is a form for you to complete in reference to your complaint regarding a telephone solicitation. Please provide any documents or copies of call records that you think would be of assistance in the explanation and support of your complaint.

Once we have received your completed form, we will attempt to identify and locate the solicitor named in your complaint. Sometimes this requires an extensive amount of time up to 4-6 weeks. Once we identify and locate the company, we will send a notice of alleged violation to the prospective company for their response and proposed resolution. The company will then have 10 working days to respond to our request for explanation. You will also receive a notification by mail from your investigator. After receiving the company's response, someone from our office will notify you by phone or mail with the results. Please provide a daytime phone number where you can be reached if possible.

If you have any questions, please feel free to contact our office at 615-741-3939 ext. 200 or 1-800-342-8359 ext. 200.

Thank you for contacting the Tennessee Regulatory Authority's Do Not Call Program.

Enclosures (2)

DO NOT CALL SOLICITATION COMPLAINT FORM

RETURN TO

Tennessee Regulatory Authority Consumer Services Division-DO NOT CALL 460 James Robertson Parkway Nashville, TN 37243-0505

IMPORTANT! This form is only for consumers who are registered in the Tennessee Do Not Call Register. If your residential telephone number *is not registered* on the Tennessee Do Not Call Register, your complaint cannot be processed. Please print or type the information requested. *Information fields with an * are required.* We cannot process your complaint unless these fields are completed.

	r Name*				
	Print your full, legal name)				
Auu	lress*:				
City	y*•	County*:	State: TN ZIP*:		
You	r Home Phone*:()	Work/Conta	act Phone:()		
Nun	nber Telemarketer called at yo	ur home*()	Your E-Mail		
Nan	ne of Telemarketer that your o	complaint is against*:			
_	(Month/Day/Year)	AM			
			hone Number:()		_
Pro	duct or Service Offered:		T. A. CITE		
			_LAST		
Call	ler Address:	G	710		
			ZIP:		
*1.	_		call was a prerecorded message	YES	
*3. *4.	The solicitor's telephone number I have retained this phone numb	•	•	YES _ YES _	
*5.	I have an existing or prior busine	•	_	YES _	
*6.	I would be willing to testify in co	-	pany I am complaining against.	YES _	
*7.	I give permission to the Tenness		obtain any records related to	125	
	this call from my telecommunic			YES _	_ NO
Dlan	se describe your complaint brid	ofly (Turn over nage and	luca back if nacassary)		
1 ica	se describe your complaint brid	eny. (Turn over page and	use back if necessary)		

